



IOWA DEPARTMENT OF NATURAL RESOURCES  
AIR QUALITY BUREAU

**Initial Notification-  
Notification of Compliance Status-Petition for Exemption**

**Miscellaneous Surface Coating Area Source Rule**

40 Code of Federal Regulations (CFR) 63.11169 – 63.11180 (Subpart HHHHHH)

*This is a multi-purpose notification form that may be used to fulfill the requirements for 1) Initial Notification; 2) Notification of Compliance Status; or 3) Petition for Exemption. The questions below indicate the information that is required for each type of notification.*

**1. Facility Information (required for all notifications):**

|  |                       |                               |      |
|--|-----------------------|-------------------------------|------|
| Facility Name:   |                       | Facility Number (if known):   |      |
|  |                       |                               |      |
| Facility Street Address:   | City:                 | State:                        | Zip: |
|  |                       |                               |      |
| Owner's Name and Title:  | Owner's phone number: | Owner's email (if available): |      |
|  |                       |                               |      |
| Owner's Mailing Address (if different from facility street address): | City:                 | State:                        | Zip: |
|  |                       |                               |      |

If the Operator information is different from above, please provide the following:

|  |                          |                                  |      |
|--|--------------------------|----------------------------------|------|
| Operator's Name and Title:   | Operator's phone number: | Operator's email (if available): |      |
|  |                          |                                  |      |
| Operator's Street Address (if different from facility street address): | City:                    | State:                           | Zip: |
|  |                          |                                  |      |

Is the facility a motor vehicle or mobile equipment surface coating operation that repairs vehicles at the customer's location, rather than at a fixed location? Yes ☐ No ☐

**2. Identification of Standard (required for all notifications):**

☐ Yes, this facility is subject to 40 CFR Part 63, Subpart HHHHHH, *National Emission Standards for Hazardous Air Pollutants: Paint Stripping and Miscellaneous Surface Coating Operations at Area Sources* (6H NESHAP), because this facility fits one of the following descriptions:

- An area source surface coating operation that coats metal and/or plastic products, motor vehicles, or mobile equipment is subject to the 6H NESHAP if the operation uses coatings that contain the Target HAP (lead, chromium, nickel, cadmium, manganese).
- An area source motor vehicle or mobile equipment surface coating operation that does **not** use the Target HAP is considered subject to the 6H NESHAP until an exemption request has been approved by the DNR. This notification form may be used as an exemption request. *If your source is in this category, you may skip ahead to the "Responsible Official Certification" section.*
- An area source metal and/or plastic products surface coating operation that does **not** use the Target HAP is exempt from the 6H NESHAP. *If your source is in this category, you do not need to complete this notification.*

3. **Brief description of the operation (required for Initial Notification and Notification of Compliance Status):**

a. This facility has a (check all that apply):

- ☐ Motor Vehicle or Mobile Equipment Surface Coating Operation  
☐ Miscellaneous Surface Coating Operation

b. Number of spray booths: \_\_\_\_\_

c. Number of preparation stations: \_\_\_\_\_

d. Number of painters usually employed: \_\_\_\_\_

4. **Compliance Status, please check one (required for Initial Notification):**

For surface coating operations, the relevant requirements are specified in the 6H NESHAP, 40 CFR 63.11173(e) through (g). The main compliance elements for this standards are: operator training (repeated every five years), HVLP or equivalent spray guns, enclosed spray area, 98% efficient filters, and non-atomized spray gun cleaning.

☐ This facility is already **in compliance** with each of the relevant requirements.

☐ This facility **will be in compliance** with each of the relevant requirements by the compliance date.

▪ **New Source** (after September 17, 2007, but before January 9, 2008): compliance date is **January 9, 2008**

▪ **New Source** (after Jan 9, 2008): compliance date is **date of startup**

▪ **Existing source** (before September 17, 2007): compliance date is **January 10, 2011**

☐ I plan to **change operations** at this facility prior to January 10, 2011, to **avoid being subject** to this rule.

*NOTE: New facilities must submit the Initial Notification within 180 days of startup. Existing facilities must submit the Initial Notification by January 11, 2010.*

5. **Certification of Compliance Status, please check one (required for Notification of Compliance Status):**

☐ This facility is a **new source** (initial startup was on or after September 17, 2007). Startup Date: \_\_\_\_\_

- If the source is a new source, a responsible official must certify below that the source is in compliance with each of the relevant requirements of the 6H NESHAP. *NOTE: New facilities must submit the Notification of Compliance Status within 180 days of start-up.*

☐ This facility is an **existing source** (initial startup was before September 17, 2007). Startup Date: \_\_\_\_\_

- If the source is an existing source, a responsible official may certify below that the source is already in compliance with each of the relevant requirements of the 6H NESHAP, or submit a separate certification no later than March 11, 2011, as specified in 40 CFR Section 63.11175(b). Please check one:

☐ I am **certifying compliance** below.

☐ I will submit the Notification of Compliance Status by **March 11, 2011**, or provide certification that I'm no longer subject to the rule.

| Responsible Official Certification<br>(check <u>all</u> that apply) |   |      |
|---|---|------|
| <input type="checkbox"/>  | I certify the truth, accuracy, and completeness of this notification.   |      |
| <input type="checkbox"/>  | The source is a motor vehicle and mobile equipment surface coating operation, but does <u>not</u> use the Target HAP. With this certification, the facility is requesting <u>an exemption</u> from the 6H NESHAP. |      |
| <input type="checkbox"/>  | The source has complied with <u>all</u> the relevant standards of the 6H NESHAP. This notification also serves as the Notification of Compliance Status.  |      |
| Responsible Official Name   |   | Date |
|   |   |      |

Submit this notification to the following agency(ies):

- Iowa Department of Natural Resources, NESHAP Coordinator, 7900 Hickman, Suite 1; Windsor Heights, IA, 50324
- If the facility is located in either Linn County or Polk County, this notification shall also be submitted to the appropriate county office:

**Polk County Public Works** – Air Quality Division  
5885 NE 14<sup>th</sup> Street; Des Moines, IA 50313

**Linn County Public Health** - Air Quality Division  
501 13<sup>th</sup> Street NW; Cedar Rapids, IA 52405